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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION**  
(37 CFR 1.63)

Declaration  
Submitted  
with Initial  
Filing

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	10561.117936
First Named Inventor	John C. Vellinger
<b>COMPLETE IF KNOWN</b>	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Apparatus and Method for Mixing Small Volumes of Liquid**

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)   as United States Application Number or PCT International

Application Number   and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number  
or Bar Code Label  OR  Correspondence address below

Robert H. Eichenberger

## Name

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Suite 400

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## City

State

ZIP

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502-581-1087

## Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	John C.	Family Name or Surname	Vellinger
Inventor's Signature	<i>John C. Vellinger</i>		Date 2/21/02
Floyds Knobs	Indiana	47119	US
Residence: City	State	Country	Citizenship

2979 N. Luther Road

## Mailing Address

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City	State	ZIP	Country

NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	John T.	Family Name or Surname	Weber
Inventor's Signature			Date
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Residence: City	State	Country	Citizenship

17102 Tom Fox Avenue

## Mailing Address

Poolesville	Maryland	20837	USA
City	Stat	ZIP	Country

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/01 (10-01)  
 Approved for use through 10/31/2002, OMB 0651-0032  
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label	<input type="checkbox"/> OR <input checked="" type="checkbox"/> Correspondence address below
<p>Robert H. Eichenberger</p> <p>Name 120 West Spring Street Suite 400</p> <p>Address New Albany City USA Country</p> <p>Indiana State 502-568-0361 Telephone 47150 ZIP 502-581-1087 Fax</p>			
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
<p>John C. Given Name (first and middle [if any])</p> <p>Inventor's Signature</p>		<p>Vellinger Family Name or Surname</p> <p>Date</p>	
<p>Floyds Knobs Residence: City</p> <p>2979 N. Luther Road</p>		<p>Indiana State</p>	<p>47119 Country</p>
<p>Floyds Knobs City</p>		<p>47119 ZIP</p>	<p>USA Country</p>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
<p>John T. Given Name (first and middle [if any])</p> <p>Inventor's Signature</p>		<p>Weber Family Name or Surname</p> <p>Date</p>	
<p>Poolesville Residence: City</p> <p>17102 Tom Fox Avenue</p>		<p>Maryland State</p>	<p>USA Country</p>
<p>Poolesville City</p>		<p>20837 ZIP</p>	<p>USA Country</p>
<p><input checked="" type="checkbox"/> Additional Inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.</p>			

PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Brock		Taylor	
Given Name		Family Name or Surname	
Inventor's Signature <i>Brock Taylor</i>		Date 2/26/2002	
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Mailing Address			
Mailing Address			
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City		State	Country USA
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Inventor's Signature		Date	
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Mailing Address			
Mailing Address			
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City		State	ZIP
			Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
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Mailing Address			
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USA Country		USA Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Nathan Given Name		Thomas Family Name or Surname	
Inventor's Signature		Date	
LOUISVILLE Residence: City	KY State	USA Country	US Citizenship
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Mailing Address			
LOUISVILLE City		KY State	40216 ZIP
USA Country		USA Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City		State	ZIP
		Country	

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